Monkeypox (hMPXV) update -- August 10, 2022

On August 4, officials from the Department of Health and Human Services (HHS) and the Food and Drug Administration (FDA) declared the ongoing hMPXV outbreak in the United States a <u>public health emergency</u>, paving the way for an increase in funding for tests, vaccines, and treatments for the poxvirus.

Monkeypox (hMPXV) continues to spread in Oregon. As of August 8, there are 32 confirmed and 57 presumptive cases of orthopoxvirus across the state. Three cases of hMPXV have been identified in Clackamas County. Nationally, more 8,934 hMPXV cases have been confirmed in 49 states and worldwide, over 30,189 cases in 88 countries have been confirmed.

New data published in Morbidity and Mortality Weekly Report and gathered by the Centers for Disease Control and Prevention (CDC) shows 99% of hMPXV cases in the United States are in males, and 94% of cases report recent male-to-male sexual or intimate contact. Black and Hispanic men are disproportionately represented in cases, with 54% of cases occurring in this population. Forty-one percent of cases were in white males. As has been seen in other countries, 41% of hMPXV case-patients in the United States are also HIV-positive. These epidemiologic details will guide treatment and vaccine protocols.

Until widespread vaccines are easily accessible, people most at-risk for infection must do everything they can to limit risk factors for contracting the virus. There should be no sexual activity for an infected person until they are recovered because right now, the disease is largely driven through sexual activity. Unlike herpes, HIV, or other sexually transmitted infections, however, hMPXV is self-limiting, and people would need to abstain from sex only for 2 to 4 weeks until their lesions heal. The person is then immune from the virus and will not experience future rashes.

Hundreds of people have been vaccinated against hMPXV in Oregon, but the vaccine approved for use against hMPXV remains in short supply. Federal health officials have approved sending more than 11,000 vaccines to Oregon, and the Oregon Health Authority has received about 7,000. Across the state, only about 1,600 doses had been administered. Two doses of Jynneos, the vaccine, about 30 days apart are required for full vaccination. But the Oregon Health Authority has advised health care providers to only give one shot unless someone is immuno-compromised since the immune response to the vaccine is quite robust and quite fast.

Clackamas County Public Health is offering vaccine clinics for hMPXV on Tuesdays at Clackamas Town Center from 11am to 7pm. Supply is limited to 260 doses per day. All appointments must be scheduled in advance.

About hMPXV

The hMPXV virus is not limited to one community or another, anyone is susceptible to the virus. hMPXV is a known virus that has caused small outbreaks in the U.S. over the last few decades. hMPXV is a viral zoonosis (a virus transmitted to humans from animals) with symptoms similar to those seen in the past in smallpox patients, although it is clinically less severe; most individuals recover without treatment.

In relative terms, hMPXV is not very transmissible and will not spread like COVID-19. Studies are currently underway to further understand the epidemiology, sources of infection, and transmission patterns. <u>Track U.S. cases here</u>.

Transmission

After a human is infected, they can infect other humans through several avenues:

- Skin-to-skin contact with the rash/sores
- Respiratory droplets, during extended face-toface contact
- Contact with fluid from the pox
- Contaminated bedding or clothing

Scientists are still researching:

- If the virus can be spread when someone has no <u>symptoms</u>.
- How often hMPXV is spread through respiratory secretions, or when a person with hMPXV symptoms might be more likely to spread the virus through respiratory secretions.
- Whether hMPXV can be spread through semen, vaginal fluids, urine, or feces.

Prevention

Surveillance and rapid identification of new cases is critical for outbreak containment. During human hMPXV outbreaks, close contact with infected persons is the most significant risk factor for hMPXV virus infection.

- Avoid sex or other intimate contact if you or your partner have new skin lesions, fever, swollen lymph nodes or
 otherwise suspect exposure to hMPXV. Condoms do not prevent the spread of the virus (but do prevent spread
 of other infections).
- Avoid contact with materials such as bedding that have been used by someone infected
- Wash hands thoroughly if you have contact with someone with hMPXV.
- If you get symptoms, isolate yourself at home until you can connect with a health care provider

Signs and Symptoms

Once someone is infected they can be sick for 2-4 weeks. The infection period is categorized into two periods:

- 1. Invasion period (0-5 days)- people typically present flu-like symptoms:
 - Fever
 - Swollen lymph nodes
 - Chills

- Headache
- Muscle aches
- Fatigue
- 2. Rash period (within 1-3 days of fever): A distinctive rash typically starts in the face, which then moves to extremities. The rash starts as raised bumps that then fill with fluid (clear to cloudy), turn into open sores, then scab over and disappear. This process usually takes 2-4 weeks. The rash can occur anywhere on the body, including face, hands, genital area, and around the anus.

For visual examples of hMPXV rash, click here.

Testing and Treatment

Testing: Testing for hMPXV is available. Ask a health care provider about testing if you develop a new rash/bumps/sores, especially if you have traveled in the last month to other areas in the world where cases have been found or you know you have been in contact with anyone with the infection.

Vaccines: At this time, limited vaccines are available for specific high-risk contacts. The vaccines are effective at protecting people against hMPXV before exposure. However, it can also help prevent disease or make it less severe after exposure. The CDC recommends the vaccine be given within four days of exposure to prevent onset of the disease. It can be given after four days to reduce the symptoms.

Treatment: Effective therapeutics have already been developed but not widely available. The antiviral ST-246 (tercovirimat), for example, was developed specifically for smallpox but works for all orthopoxviruses including hMPXV.

Other mitigation measures: COVID-19 mitigation measures, like masks and improved ventilation and filtration, will help with reducing spread.

See the Clackamas County Public Health Department hMPXV webpage for more information and resources.